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May 17, 2002

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#17

**Facsimile Transmission**1 pages including this page**TO: Examiner Jane Zara / United States Patent and Trademark Office**

Fax No.: (703) 746-5193

Phone No.: (703) 306-5820

Re: Patent Application No. 09/544,776 entitled  
NOVEL PROTEIN ASSOCIATED WITH CELL STRESS RESPONSE  
Chiron Reference: 1561.003  
Our Reference: 200130.471

 Urgent     For Review     Please Confirm Receipt     Please Reply ASAP**Comments:**

Please deliver immediately to:

Examiner Jane Zara

If you do not receive all pages, please call Carol Williams at (206) 622-4900 or fax our office.

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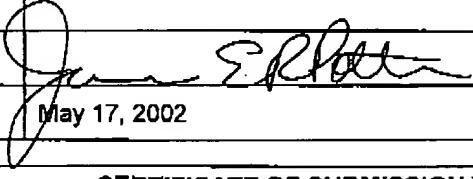
Application Number	09/544,776
Filing Date	April 7, 2000
First Named Inventor	Dong Wei
Group Art Unit	1635
Examiner Name	Jane Zara
Attorney Docket No.	PP-01561.003 / 200130.471

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (please identify below): <hr/> <hr/> <hr/> <hr/>
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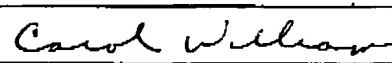
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Jane E. R. Potter	 00500 PATENT TRADEMARK OFFICE
Signature		
Date	May 17, 2002	

## CERTIFICATE OF SUBMISSION VIA FACSIMILE

I hereby certify that this correspondence is being submitted via facsimile to Examiner Jane Zara at (703) 746-5193.

Typed or printed name	Carol Williams	
Signature		Date: May 17, 2002

(JEP:cow) #285410